

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Grant	2. Surname (Last Name) Cochran	3. Date 26-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Steele, Clarence
5. Manuscript Title Femoral Neck Stress Fractures: MRI Risk Factors for Progression		
6. Manuscript Identifying Number (if you know it) JBJS-D-17-01593R1		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

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Dr. Cochran has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Bradley

2. Surname (Last Name)

Deafenbaugh

3. Date

26-February-2018

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Steele, Clarence

5. Manuscript Title

Femoral Neck Stress Fractures: MRI Risk Factors for Progression

6. Manuscript Identifying Number (if you know it)

JBJS-D-17-01593R1

Section 2. The Work Under Consideration for Publication

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Deafenbaugh has nothing to disclose.

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1. Given Name (First Name) Kevin	2. Surname (Last Name) Kuhn	3. Date 26-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Steele, Clarence
5. Manuscript Title Femoral Neck Stress Fractures: MRI Risk Factors for Progression		
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Section 1. Identifying Information

1. Given Name (First Name) Christopher	2. Surname (Last Name) Renninger	3. Date 26-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Steele, Clarence
5. Manuscript Title Femoral Neck Stress Fractures: MRI Risk Factors for Progression		
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Section 1. Identifying Information

1. Given Name (First Name)
Clarence

2. Surname (Last Name)
Steele

3. Date
26-February-2018

4. Are you the corresponding author? Yes No

5. Manuscript Title
Femoral Neck Stress Fractures: MRI Risk Factors for Progression

6. Manuscript Identifying Number (if you know it)
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